

**Registration Form - Medicaid Workshops**  
(Please print, complete all fields and FAX to 573/526-4382)

**Please Note: No training materials will be provided. All training materials must be downloaded from this site on or after October 1, 2003 and brought with you on the date of each workshop. All Medicaid workshops will be held at the Governor Office Building, 200 Madison St., Jefferson City, MO. A parking garage is located across the street.**

Date	Title of Workshop	WS#	Time	Location
Oct. 7, 2003	Physician – New Billing Session	10-01	8:30 a.m. – 3:30 p.m.	Room 450
Oct. 7, 2003	Durable Medical Equipment	10-02	8:30 a.m. – 11:30 a.m.	Room 470
Oct. 7, 2003	Durable Medical Equipment	10-03	1:00 p.m. – 4:00 p.m.	Room 470
Oct. 8, 2003	Physician – Established Biller Q&A	10-04	8:30 a.m. – 11:30 a.m.	Room 450
Oct. 8, 2003	Physician – Established Biller Q&A	10-05	1:00 p.m. – 4:00 p.m.	Room 450
Oct. 9, 2003	Psychology/Counseling	10-06	8:30 a.m. – 11:30 p.m.	Room 470
Oct. 9, 2003	Psychology/Counseling	10-07	1:00 p.m. – 4:00 p.m.	Room 470
Oct. 21, 2003	Physician – New Billing Session	10-08	8:30 a.m. – 3:30 p.m.	Room 450
Oct. 21, 2003	Durable Medical Equipment	10-09	8:30 a.m. – 11:30 a.m.	Room 470
Oct. 21, 2003	Durable Medical Equipment	10-10	1:00 p.m. – 4:00 p.m.	Room 470
Oct. 22, 2003	Physician – Established Biller Q&A	10-11	8:30 a.m. – 11:30 a.m.	Room 450
Oct. 22, 2003	Physician – Established Biller Q&A	10-12	1:00 p.m. – 4:00 p.m.	Room 450
Oct. 23, 2003	Psychology/Counseling	10-13	8:30 a.m. – 11:30 a.m.	Room 470
Oct. 23, 2003	Psychology/Counseling	10-14	1:00 p.m. – 4:00 p.m.	Room 470
Nov. 4, 2003	Physician – New Billing Session	11-01	8:30 a.m. – 3:30 p.m.	Room 450
Nov. 4, 2003	Durable Medical Equipment	11-02	8:30 a.m. – 11:30 a.m.	Room 470
Nov. 4, 2003	Durable Medical Equipment	11-03	1:00 p.m. – 4:00 p.m.	Room 470
Nov. 5, 2003	Physician – Established Biller Q&A	11-04	8:30 a.m. – 11:30 a.m.	Room 450
Nov. 5, 2003	Physician – Established Biller Q&A	11-05	1:00 p.m. – 4:00 p.m.	Room 450
Nov. 6, 2003	Durable Medical Equipment	11-06	8:30 a.m. – 11:30 a.m.	Room 470
Nov. 6, 2003	Psychology/Counseling	11-07	1:00 p.m. – 4:00 p.m.	Room 470

**Workshop Selection**

Workshop Date:\_\_\_\_\_ Title of Workshop\_\_\_\_\_ Workshop Number (WS#)\_\_\_\_\_

Number of Attendees (limit to 2 per provider location)\_\_\_\_\_ Provider Name\_\_\_\_\_

Medicaid Provider Number\_\_\_\_\_ Contact Name & Phone Number\_\_\_\_\_

Attendee #1 Name\_\_\_\_\_ Attendee #2 Name\_\_\_\_\_

Address\_\_\_\_\_

If you have a specific question you want us to address in the workshop, please indicate below:

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**Fax this form to the Provider Education Unit at 573/526-4382 or mail to Division of Medical Services, P.O. Box 6500, Jefferson City, MO 65102-6500. No confirmation will be sent. You will only be contacted if the space is unavailable. Please do not contact workshop site; they cannot confirm registration.**

**Note: No training materials are available at the workshop; you must download the training material on or after October 1, 2003 from this website and bring with you to the training. Registration for each workshop begins 30 minutes prior to each session.**